Department of the Prosecuting Attorney ID Theft Complaint Form

PLEASE READ THE FOLLOWING BEFORE COMPLETING THE FORM: I hereby acknowledge and understand that the Department of the Prosecuting Attorney is not permitted to act as attorney on behalf of individuals. The Department of the Prosecuting Attorney does not conduct criminal investigations; it prosecutes cases in court. The police department investigates allegations of crime. This complaint form may be referred to the police department for investigation. The results of the investigation may be referred to this Office for possible criminal prosecution. I understand that filing this complaint does not take the place of filing a police report or seeking relief with the aid of a private attorney or by filing an action in small claims court.

	INITIALS					
Name:						
Home Address						
Business Address						
Home Telephone	Business Telephone					
- 'I A I I						
1. Types of Identify Theft you	have experienced					
☐ Credit Cards	☐ Securities or Other Investments					
☐ Checking or Savings Account	☐ Internet or E-Mail					
☐ Loans	☐ Government Documents or Benefits					
☐ Phone or Utilities	☐ Other					
Did the suspect use the Internet t	o open the account or purchase the goods or services?					
☐ Yes ☐ No ☐ Don't Kn	ow					
2. Details of the Identity Theft						
When did you notice that you mig	ht be a victim of identity theft?					
When did the identity theft first or	ccur? (i.e., when was the first account opened?)					
How many accounts (credit cards etc.) were opened or accessed?	s, loans, bank accounts, cellular phone accounts,					
How much money, if any, have ye	ou had to pay?					
How much money, if any, did the identity thief obtain from companies in your name?						
What other problems, if any, have you experienced as a result of the identity theft?						
3. The Identity Thief						
Please provide any information ye addresses or phone numbers the	ou may have about the identity thief, including his or her name, and any identity thief may have used.					
Name						
Home Address						
Business Address						
Home Telephone	Business Telephone					
Email Address						
Your relationship to identity thief						

4. Contacts							
Called to report the fraud?	□Equifax	☐ Experian	□ Trans Union	□ Other	☐ None		
Put a "fraud alert" on your report?	□ Equifax	☐ Experian	☐ Trans Union	□ Other	□ None		
Ordered your credit report?	□ Equifax	☐ Experian	☐ Trans Union	□ Other	☐ None		
Problem with Credit Bureau?	☐ Equifax	☐ Experian	☐ Trans Union	□ Other	☐ None		
Have you contacted the police?	□ Yes □	No					
If yes, please provide police department name							
If yes, please provide report number							
If you have not contacted police, are you willing to do so? ☐ Yes ☐ No ☐ Don't Know							
Are you willing to prosecute? □	Yes □ No	□ Don't Know					
5. Describe Your Complaint Here							
Please give us information about the identity theft, including, but not limited to, how the theft occurred, who may							
be responsible for the theft, and what actions you have taken since the theft. Please include a list of companies where fraudulent accounts were established or your current accounts were affected.							
where haddlent accounts were est	abilished of your	current accounts	were anected.				

DATE _____ YOUR SIGNATURE _____